

LAW OFFICES

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*Robin*  
APR 25 1989

D. SCOTT CURZI  
LEONARD J. ARTIGLIERE\*

\* MEMBER OF N. J. AND PA. BARS

RECEIVED

April 18, 1989

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U. S. Environmental Protection Agency  
ATTN: MS. ROBIN MOSES  
Region II  
Jacob K. Javits Federal Building  
New York, New York 10278

RE: THOMAS DELORENZO/HIGH POINT SANITATION

Dear Ms. Moses:

Pursuant to our telephone discussion of April 18, 1989, I am forwarding a copy of your letter dated March 29, 1989 to the attorneys handling a civil matter for High Point Sanitation.

It is my understanding that High Point Sanitation ceased operations. The D.E.P. closed the landfill in Franklin Township on October 26, 1983. The collection business terminated sometime late in 1986. I believe the corporation is now under the control of the D.E.P. I believe that they would have the information you are seeking.

If I can be of further assistance, please contact me.

Very truly yours,

D. SCOTT CURZI, P.A.

BY:

*Leonard J. Artigliere*  
LEONARD J. ARTIGLIERE

LJA/plb

cc: Thomas DeLorenzo

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EPA Mailing  
NOT IN FILE

<b>SENDER:</b> Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.	
1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. (Extra charge)      2. <input type="checkbox"/> Restricted Delivery (Extra charge)	
3. Article Addressed to:  Mr. Tom De Lorenzo High Point SLF High Point Sanitation Company 20 Star Plaza East Washington, New Jersey 07882	4. Article Number <b>P345818505</b> Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input checked="" type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee for agent and DATE DELIVERED.
5. Signature — Address X	6. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>MC Yetter</i>	
7. Date of Delivery	

PS Form 3811, Mar. 1988

★ U.S.G.P.O. 1988-212-865

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